

REPORTS INVENTORY				CONTROL NO.	
PREPARED IN DUPLICATE					
1. TYPE OF REPORT (For fill-in report include Form No.)				2. TYPE OF REPORT	
Estimated Language Training Requirements				<input checked="" type="checkbox"/> ESTIMATION <input type="checkbox"/> IDENTIFICATION <input type="checkbox"/> MACHINE-MADE LISTING	
3. FUNCTIONAL AREA		PERSONNEL <input checked="" type="checkbox"/> TRAINING LOGISTICS <input type="checkbox"/> SECURITY MEDICAL <input type="checkbox"/> FINANCE		ADMIN. GENERAL OTHER (specify)	
4. NO. OF COPIES PREPARED		5. FREQUENCY (weekly, monthly, quarterly, etc.)		6. DISTRIBUTION (No. of components not number of copies)	
2		Semi-annual			
7. FORMAT (memorandum, form, computer print-out, etc.)		8. ADP PROCESSING		9. DIRECTIVE AUTHORITY REQUIRING REPORT	
memo		YES <input type="checkbox"/> IF YES GIVE ADP PROCESSING NO. NO <input checked="" type="checkbox"/>		Executive Director-Compt Memo	
10. PREPARING COMPONENT (include lowest level contributing information to report)			11. FEEDER REPORTS (State total number and identify by Title, Form No., or nomenclature. Attach separate sheet if necessary.)		
All Offices within DD/S&T					

## 12. COST FACTORS

A. MANUAL PREPARATION AND REVIEW COSTS					
GRADE	HOURLY RATE	X	HOURS PER REPORT	=	COST PER REPORT
7 - GS-12	\$6.82		21		\$143.23
1 - GS-5	\$3.19		4		12.76
					\$286.46
					25.52
					\$311.98
B. COSTS OF COMPUTER PRODUCED REPORTS					
TOTAL COSTS PER YEAR					

13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (in addition to directive or authority cited in item 9). IF KNOWN, INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT.

This report was established at the request of the Executive Director-Comptroller. It is submitted semi-annually to the Office of Training to assist in anticipating student load and preparing for instructor availability.

## 14. FUTURE GOALS

14. FUTURE GOALS		ESTIMATED SAVINGS	
DATE PROPOSED BY COMPONENT FOR THIS REPORT	ESTIMATED SAVINGS	MAN-HOURS	DOLLARS
<input checked="" type="checkbox"/> RETAIN AS IS <input type="checkbox"/> CHANGE <input type="checkbox"/> DISCONTINUE	OTHER (explain)		
15. DATE OF INVENTORY: 12 October 1970 16. NAME AND TITLE OF PERSON FURNISHING INFORMATION: C/AS/DDS&T		17. STAT. 18. EXTENSION	